## FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

		Office Use Only
1. NAME OF COMMITTEE (in full) USE FEC MAIL OR TYPE OR F		
Price for Congress  ADDRESS (number and street)  Check if different than previously reported. (ACC)  Roswell	25	GA 30077
2. FEC IDENTIFICATION NUMBER ▼	CITY 🛕	STATE A ZIP CODE A
C00386755	3. IS THIS X NEW (N) OR	AMENDED GA G GA G GA G GA G GA G GA G GA GA GA
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  Termination Report (TER)	(b) 12-Day PRE-Election Report for the Primary (12P) Convention (12C) Election on  (c) 30-Day POST-Election Report for the X General (30G) Election on	General (12G) Runoff (12R)  Special (12S)  in the State of
5. Covering Period 1 0 1 9	2 0 0 6 through 1	1 27 2006
I certify that I have examined this Report and to the Type or Print Name of Treasurer  Stepho	e best of my knowledge and belief it is true, content M. Dorvee, Treasurer	rect and complete.
Signature of Treasurer Electronically Filed by  NOTE: Submission of false, erroneous, or incomp	Stephen M. Dorvee, Treasurer	Date 1 2 0 5 2 0 0 6 g this Report to the penalties of 2 U.S.C 437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)

### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Price for Congress 2 7 19 2006 1 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 51059.00 1950238.80 (other than loans) (from Line 11(e))..... (b) Total Contribution Refunds 0.00 100.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 51059.00 1950138.80 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 138273.25 1333700.75 (from Line 17)..... (b) Total Offsets to Operating 2000.00 4390.79 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1329309.96 136273.25 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 184760.05 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 256131.31 Schedule C and/or Schedule D)..... For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

## POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name Price for Congress D Report Covering the Period: 27 1.0 19 2006 1.1 2006 To: From: I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Total for Election Cycle Total as of** 11. CONTRIBUTIONS 2006 0 7 2006 0 8 1,1 11 (other than loans) FROM: (a) Individuals/Persons Other than (date of general election) **Political Committees** (date after general election) (i) Itemized (Use Schedule A) through 17155.00 2006 11 27 (ii) Unitemized (last day of reporting period) 5054.00 (iii) Total of contributions from individuals 22209.00 1105824.26 3015.00 (b) Political Party Committees 0.00 21.65 0.00 (c) Other Political Committees 28850.00 844192.89 100.00

FEC Form 3 (Revised 02/2003)

# POST-ELECTION DETAILED SUMMARY PAGE Report of Receipts and Disbursements

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Page 6

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period)     (* See page 5 for dates)
	(d) The Candidate		1
	0.00	200.00	0.00
	(e) TOTAL CONTRIBUTIONS (other than loa	ns) (add Lines 11(a)(iii), (b), (c) and (d))	
	51059.00	1950238.80	3115.00
12.	TRANSFERS FROM OTHER AUTHORIZED (	COMMITTEES	
	0.00	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	0.00	250000.00	0.00
	(b). All Other Loans		
	0.00	0.00	0.00
	(c). TOTAL LOANS (add Lines 13(a) and (b))		
	0.00	250000.00	0.00
14.	OFFSETS TO OPERATING EXPENDITURES	(refunds, rebates, etc)	
	2000.00	4390.79	2000.00
15.	OTHER RECEIPTS (Dividends, Interest, etc)		
	4777.26	9081.30	1734.04
16.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 ar	nd 15)	
	57836.26	2213710.89	6849.04

# POST ELECTION DETAILED SUMMARY PAGE

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FEC Form 3 (Revised 02/2003) Report of Receipts and Disbursements Page 7 Write or Type Committe Name Price for Congress 2006 2 7 2 0 0 6 Report the covering period From: To: II. DISBURSEMENTS **COLUMN A COLUMN B COLUMN C** Election Cycle Total as of \* Total for \* Total this period (date after general election) (date of general election) (\* See page 5 for date) Through \* (last day of reporting period) (\* See page 5 for date) 17. OPERATING EXPENDITURES 138273.25 1333700.75 21739.42 18. TRANSFER TO OTHER AUTHORIZED COMMITTIES 50000.00 302857.00 0.00 19. LOAN PAYMENTS (a) Of Loans Made or Guaranteed by the Candidate 250000.00 242868.69 250000.00 (b) Of All Other Loans 0.00 0.00 0.00 (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b)) 250000.00 242868.69 250000.00 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 100.00 (b) Political Party Committees 0.00 0.00 0.00

FEC Form 3 (Revised 02/2003)

# POST ELECTION DETAILED SUMMARY PAGE

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	COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
	(c) Other political committees (such as PACs)			(,
	0.00	0.00		0.00
	(d) TOTAL CONTRIBUTION REFUNDS (See Line	s 20(a), (b) and (c) )		
	0.00	100.00		0.00
21.	OTHER DISBURSEMENTS			
	52100.00	178885.76		0.00
22.	TOTAL DISBURSEMENTS (add lines 17, 18, 19(d	s), 20(d), and 21)		
	490373.25	2058412.20		271739.42
_	III. NET CONTRIBUTIONS (OTHER THAN LO	•		
	(Note: Substitute in lieu of Line #6 of Su	mmary Page for this report only; subtract line 20(d) for	om Line 11(e))	
	51059.00	1950138.80		3115.00
	IV. NET OPERATING EXPENDITURES			
	(Note: Substitute in lieu of Line #7 of Su	mmary Page for this report only; subtract line 14 from	ı Line 17)	
	136273.25	1329309.96		19739.42
	V. CASH SUMMA	NRY		
23.	CASH ON HAND AT BEGINING OF REPORTING	PERIOD		617297.04
24.	TOTAL RECEIPTS AT THIS PERIOD (from Line	16)		57836.26
25.	SUBTOTAL(add Line 23 and Line 24)			675133.30
26.	TOTAL DISBURSEMENTS AT THIS PERIOD (fro	m Line 22)		490373.25
27	CASH ON HAND AT CLOSE OF DEPORTING DE			184760.05

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 64 (check only one)  11a
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Price for Congress			
<b>А</b> .	Full Name (Last, First, Middle Initial) AFLAC Incorporated PAC  Mailing Address 1932 Wynnton Road  City Columbus  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2006 Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Air Products Political Alliance PAC Mailing Address P.O. Box 441  City Trexlertown  FEC ID number of contributing	State PA	Zip Code 31999 16000.00  Zip Code 18087	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee.  Name of Employer  Receipt For: 2006 Primary X General Other (specify)	Occupation C	n Cycle-to-Date ▼ 1250.00	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) Altria Group Inc PAC Mailing Address 101 Constitution Ave N City Washington FEC ID number of contributing federal political committee.	State DC	Zip Code 20001	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer  Receipt For: 2006  Primary X General Other (specify) ▼	Occupation  Election C	cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			4000.00
T	OTAL This Period (last page this line number of	only)	<b>_</b>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 64 (check only one)  11a 11b X 11c 11d 11d 12 13a 13b 14 15			
Any information copied from such Reports and or for commercial purposes, other than using the such as	l Statements ma he name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Price for Congress						
Full Name (Last, First, Middle Initial) American Academy of Nurse Prac. PAC Mailing Address P.O. Box 40473  City Renfro Valley  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2006 Primary X General Other (specify)	State KY C Occupation	Zip Code 40473 on Cycle-to-Date ▼	Date of Receipt    M M			
Full Name (Last, First, Middle Initial) American Assn of Clinical Urol.  Mailing Address Urologists PAC 1111 N. Plaza Drive City Schaumburg  FEC ID number of contributing federal political committee.	Suite 550 State IL	Zip Code 60173	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Employer  Receipt For: 2006  Primary X General  Other (specify) ▼	Occupation C	Cycle-to-Date ▼ 11000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Full Name (Last, First, Middle Initial)  American Assn of Neurological Surgeons  Mailing Address 5550 Meadowbrook  City  Rolling Meadows  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2006  Primary X General  Other (specify)	State IL C	Zip Code 60008 on Cycle-to-Date ▼	Date of Receipt    M			
SUBTOTAL of Receipts This Page (optional)						
TOTAL This Period (last page this line numb	er only)	·				

S	CHEDULE A (FEC Form 3 )		11	FOR LINE NUMBER: PAGE 9 / 64	
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)	
"	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d	
				12   13a   13b   14   15	
An or	y information copied from such Reports and S for commercial purposes, other than using the	statements may name and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)				
	Price for Congress			_	
A.	Full Name (Last, First, Middle Initial) American Dental PAC			Date of Receipt	
	Mailing Address 1111 14th St NW Ste			10 23 7 2006	
	City	State	Zip Code	Transaction ID: 61023.C9632	
	Washington	DC	20005-5683	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		5000.00	
	Name of Employer	Occupation	1	Receipt  Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General	1		1	
	Other (specify) ▼		10000.00		
В.	Full Name (Last, First, Middle Initial) CH2M Hill Companies PAC			Date of Receipt	
	Mailing Address 115 Perimeter Center Place, NE Suite 700			11 02 4 2006	
	City	State	Zip Code	Transaction ID: 61102.C9676	
	Atlanta	GA	30346	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer	Occupation	ו	Receipt  Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General Other (specify) ▼	0 0	2000.00		
<u> </u>	Full Name (Last, First, Middle Initial) Devry PAC	1		Date of Receipt	
	Mailing Address 1 Tower Ln			1 1 2 7 2 0 0 6	
	City	State	Zip Code	Transaction ID: 61123.C9804	
	Oakbrook Terrace	<u> </u>	60181-4671	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		100.00	
	Name of Employer	Occupation	١	Receipt  Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General Other (specify) ▼	0 0	100.00		
s	UBTOTAL of Receipts This Page (optional)		<b>_</b>	6100.00	
	TOTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3	<b>)</b>		FOR LINE NUMBER: PAGE 10 / 64		
•	′	Use separate schedule(s) or each category of the	(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d		
			12 13a 13b 14 15		
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	r not be sold or used by any pers Iress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
Price for Congress					
Full Name (Last, First, Middle Initial)  A. Georgia Power Co. Federal PAC			Date of Receipt		
Mailing Address 241 Ralph McGill B	vd.		10 26 2006		
City	State	Zip Code	Transaction ID: 61026.C9651		
<u>Atlanta</u>	GA	30308	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		1000.00		
Name of Employer	Occupation	1	Receipt		
Receipt For: 2006	Flection C	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Primary X General		· · · · · · · · · · · · · · · · · · ·	7		
Other (specify)	0 0	12000.00			
Full Name (Last, First, Middle Initial) <b>B.</b> Medtronic Medical Technology Fund	•		Date of Receipt		
Mailing Address 1420 New York Ave	10 23 2006				
City	State	Zip Code	Transaction ID: 61023.C9643		
Washington	DC	20005	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		2000.00		
Name of Employer	Occupation	1	Receipt		
Receipt For: 2006		unla ta Data	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Receipt For: 2006 Primary X General	Election C	ycle-to-Date ▼			
Other (specify)		2000.00			
Full Name (Last, First, Middle Initial)  C. Meredith Corporation Employees Fund	·		Date of Receipt		
Mailing Address 1716 locust Street			M M / D D / Y Y Y Y		
City	State	Zip Code	1 0 2 3 2 0 0 6 Transaction ID: 61023.C9644		
Des Moines	IA	50309	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer	Occupation	1	Receipt  Limit Increased Due to Opponent's		
Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
Primary X General	1		7		
Other (specify) ▼	0 0	500.00			
SUBTOTAL of Receipts This Page (optional	)		3500.00		
TOTAL This Period (last page this line numl	TOTAL This Period (last page this line number only)				

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 64 (check only one)  11a 11b X 11c 11d 12 13a 13b 14 15		
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Price for Congress					
Α.	Full Name (Last, First, Middle Initial) Pediatric Dentistry PAC  Mailing Address Amer. Acad. of Pediatric 211 E. Chicago Ave., #7  City Chicago  FEC ID number of contributing federal political committee.  Name of Employer		Zip Code 60611	Date of Receipt    M M		
	Receipt For: 2006 Primary X General Other (specify)		ycle-to-Date ▼ 3500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
3.	Full Name (Last, First, Middle Initial) Polyone Corporation Pac Mailing Address 33587 Walker Rd.  City Avon Lake	State OH	Zip Code 44012	Date of Receipt    M M M		
	FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2006 Primary X General Other (specify)	C		Spending (2 U.S.C. 441a(i)/441a-1)		
D.	Full Name (Last, First, Middle Initial) SMAC PAC Mailing Address P.O. Box 221230  City Chantilly  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2006 Primary X General Other (specify)	State VA  C  Occupation Election C	Zip Code 20153-1230 1 ycle-to-Date ▼ 5000.00	Date of Receipt    M   M   23   2006     Transaction ID: 61023.C9629     Amount of Each Receipt this Period     2500.00     Receipt     Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
SI	UBTOTAL of Receipts This Page (optional)			5500.00		
T	TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3 )	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/64			
TEMIZED RECEIPTS	or each category of the	(check only one)			
	Detailed Summary Page	12 13a 13b 14 15			
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)					
Price for Congress					
Full Name (Last, First, Middle Initial)  A. Society of Interventional Radiology PAC		Date of Receipt			
Mailing Address 3975 Fair Ridge Drive,	Suite 400	10 26 2006			
City	State Zip Code	Transaction ID: 61026.C9648			
<u>Fairfax</u>	VA 22033	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer	Occupation	Receipt  Limit Increased Due to Opponent's			
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General	2000.00				
Other (specify) ▼	2000.00	_			
Full Name (Last, First, Middle Initial)  3. Triangle Orthopaedic Assoc. PAC		Date of Receipt			
Mailing Address 120 William Penn Plaz	10 26 2006				
City	State Zip Code	Transaction ID: 61026.C9661			
Durham	NC 27704	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	Receipt  Limit Increased Due to Opponent's			
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General Other (specify)	250.00				
		_			
Full Name (Last, First, Middle Initial) USAA Employee PAC		Date of Receipt			
Mailing Address USAA Building D-3-W		11 02 7 9 9 9			
City	State Zip Code	Transaction ID: 61102.C9674			
San Antonio	TX 78288	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer	Occupation	Receipt  Limit Increased Due to Opponent's			
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General Other (specify)	3000.00	7			
☐ Otilei (specily) ▼		_			
SUBTOTAL of Receipts This Page (optional)		2250.00			
TOTAL This Period (last page this line number	DTAL This Period (last page this line number only)				
	,,	-			

SCHEDULE A (FEC Form 3 )	Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/64			
TEMIZED RECEIPTS	or each category of the	(check only one)			
· · · · · · · · · · · · · · · · · · ·	Detailed Summary Page	X   11a   11b   11c   11d   15   12   13a   13b   14   15			
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a	ts may not be sold or used by any persond address of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)	The address of any political committee to	Solicit Continuations from Such Continuities.			
Price for Congress					
Full Name (Last, First, Middle Initial)  A. Edward Annis, MD		Date of Receipt			
Mailing Address 422 NE 93rd Street	•				
City Sta	ate Zip Code	1 1 0 6 2 0 0 6 Transaction ID: 61123.C9758			
Miami FL	33158	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		100.00			
None	upation	Receipt			
Ret		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 Elec	ction Cycle-to-Date ▼				
Other (specify) ▼	800.00				
Full Name (Last, First, Middle Initial)  3. Anne Barnett, MD		Date of Receipt			
Mailing Address 1269 Ragley Hall Road NE	11 02 7 2006				
,	ate Zip Code	Transaction ID: 61102.C9726			
Atlanta G	A 30319	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		200.00 Receipt			
Neido Momone 9 Maternal	upation	'			
<u>Feta</u> Priy	sician ction Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General		1			
Other (specify) ▼	700.00				
Full Name (Last, First, Middle Initial) John Batson		Date of Receipt			
Mailing Address 12065 Shallowford Rd.		11 02 7 2006			
•	ate Zip Code	Transaction ID: 61102.C9677			
Roswell G	A 30075	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		150.00  Receipt			
Self-Employed	upation Il Estate	Limit Increased Due to Opponent's			
	ction Cycle-to-Date	Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General	400.00	1			
Other (specify) ▼	400.00				
SUBTOTAL of Receipts This Page (optional)		450.00			
TOTAL This Period (last page this line number only)					

S	CHEDULE A (FEC Form 3 )		Llac congrete cohodule(a)	FOR LINE NUMBER: PAGE 14 / 64
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Cathy Blight, MD			Date of Receipt
	Mailing Address 2615 Circle Drive			11 20 7 2006
	City	State	Zip Code	Transaction ID: 61123.C9785
	Flint	MI	48507	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	n	Receipt
	Self	Physiciar	า	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	-	500.00	7
	Other (specify) ▼	0 0	300.00	
_	Full Name (Last, First, Middle Initial)			
В.	3			Date of Receipt
	Mailing Address 3832 Wesley Chapel	11 02 2006		
	City	State	Zip Code	Transaction ID: 61102.C9708
	Marietta	GA	30062	Amount of Each Receipt this Period
	FEC ID number of contributing			200.00
	federal political committee.	C		200.00
	Name of Employer	Occupation	n	- Receipt
	Name of Employer GA EMC	CEO		Limit Increased Due to Opponent's
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	1	1 1 1 1 1 1 1	7
	Other (specify) ▼	0 0	1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Reay Brown			Date of Receipt
	Mailing Address 3845 Club Drive, NE.			M M / D D / Y Y Y Y
	0::	0	7: 0 !	11 02 2006
	City	State	Zip Code	Transaction ID: 61102.C9725
	Atlanta	GA	30319	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-Employed	Occupation		Receipt
		Physician		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 0.3.0. 441a(I)/441a-1)
	Primary X General		600.00	7
	Other (specify) ▼	0 0	000.00	1
				1200.00
Ls	UBTOTAL of Receipts This Page (optional)			
_	OTAL This Period (last page this line numbe	er only)		

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 15 / 64   (check only one)
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Tom Cannon			Date of Receipt
	Mailing Address 151 Atlanta Country C			10 23 2006
	City <u>Marietta</u>	State GA	Zip Code 30067	Transaction ID: 61023.C9647  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self-Employed	Occupation Investor		Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 2000.00	Sporturing (2 0.0.0. 441a(1)/441a 1)
В.				Date of Receipt
	Mailing Address 5780 Windward Parkw	10 23 7 2006		
	City Alpharetta	State GA	Zip Code 30005	Transaction ID: 61023.C9630  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33000	2000.00
	Name of Employer Chatham Neighborhoods, LLC	Occupation Presiden	t	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General Other (specify)	Election C	Sycle-to-Date ▼ 3000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Joel Cohen	•		Date of Receipt
	Mailing Address 2828 Peachtree Road,	#2100		1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 61102.C9715
	Atlanta  FEC ID number of contributing federal political committee.	GA C	30305	Amount of Each Receipt this Period
	Name of Employer None	Occupation Retired		Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 300.00	
s	UBTOTAL of Receipts This Page (optional)			3100.00
T	OTAL This Period (last page this line number	only)		

SI	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/64
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)  X 11a 11b 11c 11d
_				12 13a 13b 14 15
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Price for Congress			
۹.	Full Name (Last, First, Middle Initial) Crabapple OBGYN			Date of Receipt
	Mailing Address 1250 Upper Hembree Ro	d		1 1 0 6 2 0 0 6
	City	State	Zip Code	Transaction ID: 61123.C9761
	Roswell	GA	30076-4651	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	l	Receipt  Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) Susan Wheatley			Date of Receipt
	Mailing Address 13535 New Providence I	1 1 0 6 2 0 0 6		
	City	State	Zip Code	Transaction ID: 61123.C9762
	Alpharetta	GA	30004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Crab Apple OB/GYN	Occupation		Memo
		Physician Co	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General	Election C		[MEMO ITEM] Partnership->Crabapple OB-
	Other (specify) ▼	0 0	3100.00	GYN
<del>.</del> Э.	Full Name (Last, First, Middle Initial) John Cucinotta			Date of Receipt
	Mailing Address 4835 Sweet Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 61123.C9740
	Manlius	NY	13104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer Self-Employed	Occupation		Receipt
		Physician		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General	Election C	ycle-to-Date ▼	
	Other (specify) ▼		220.00	
s	UBTOTAL of Receipts This Page (optional)			1010.00
_	OTAL This Period (last nage this line number or	-l-s)		
	LILE THIS PERIOD HAS BARE THIS HIP DI IMPOR OF	HV1		

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 17/64   (check only one)
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Price for Congress		71	
Α.	- · · · · · · · · · · · · · · · · · · ·			Date of Receipt
	Mailing Address 3038 Loridan Way SE	111 06 2006		
	City Atlanta	State GA	Zip Code 30339-5721	Transaction ID: 61123.C9749  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self  Receipt For: 2006  Primary X General Other (specify) ▼	Occupation Anesthes Election C		Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
— В.	Full Name (Last, First, Middle Initial) Mark Diehl			Date of Receipt
٥.	Mailing Address 1110 Hazeltine Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Kennesaw	State GA	Zip Code 30152	Transaction ID: 61123.C9774
	FEC ID number of contributing federal political committee.	C	30132	Amount of Each Receipt this Period  500.00
	Name of Employer Pinnacle Orthopaedics	Occupation Surgeon		Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General Other (specify)	Election C	Cycle-to-Date ▼ 1350.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Roy Farmer			Date of Receipt
	Mailing Address 120 Dunwoody Creek	11 02 7 2006		
	City Atlanta	State GA	Zip Code 30350	Transaction ID: 61102.C9727
	FEC ID number of contributing federal political committee.	C	3030	Amount of Each Receipt this Period
	Name of Employer Information Requested		on Requested	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General Other (specify)	Election C	Cycle-to-Date ▼ 250.00	Sportaling (2 5.5.5: Tria(ii) Tria 1)
s	UBTOTAL of Receipts This Page (optional)			1150.00
  -	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 64 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) F. Link Forester			Date of Receipt
	Mailing Address 220 Sandtrap Way			1 1 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Roswell	State GA	Zip Code 30076	Transaction ID: 61123.C9795  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00070	100.00
	Name of Employer Self-Employed	1	ate Broker	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 100.00	
В.	Full Name (Last, First, Middle Initial) Thomas Fuller Mailing Address - F465 Free PLNW			Date of Receipt
	Mailing Address 5465 Errol PI NW			11 20 4 2006
	City Atlanta	State GA	Zip Code 30327-4871	Transaction ID: 61123.C9798  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Diagnostic Imaging Specia- lists	Occupation Physician	1	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 500.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) James Galicki			Date of Receipt
	Mailing Address 715 Old Knoll, VW			1 1 0 2 2 0 0 6
	City Alpharetta	State GA	Zip Code 30022	Transaction ID: 61102.C9723
	FEC ID number of contributing federal political committee.	C	30022	Amount of Each Receipt this Period
	Name of Employer Information Requested		on Requested	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 650.00	Opending (2 0.0.0. 441a(1)/441a 1)
s	UBTOTAL of Receipts This Page (optional)			750.00
T	OTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 64 (check only one)				
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d				
Ar	ny information copied from such Reports and Stateme	ents may	not be sold or used by any perso	n for the purpose of soliciting contributions				
or	for commercial purposes, other than using the name	and add	lress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	Price for Congress							
^	Full Name (Last, First, Middle Initial)			Data of Danaira				
Α.	Maria Gaudio  Mailing Address 1478 Forest Lane			Date of Receipt				
	-			11 20 2006				
	•	State SA	Zip Code 30067	Transaction ID: 61123.C9779				
	FFO ID worth and found the firm		30007	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	;		500.00				
	Name of Employer Oc Cherokee Physiotherapy	cupation	1	Receipt				
		•	Therapist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
	Receipt For: 2006 Ele	ection C	ycle-to-Date ▼	Sponding (2 0.0.0. 4414(1)/4414 1)				
	Other (specify)		500.00					
В.	Full Name (Last, First, Middle Initial) Randolph Gould			Date of Receipt				
	Mailing Address 1801 Windy Ridge Point			1 1 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City S	State	Zip Code	Transaction ID: 61123.C9750				
	Virginia Beach V	/A	23454	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	;		200.00				
	Name of Employer Oc	cupation	1	Receipt				
	Self-Employed Ph	ıysiciar	1	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
		ection C	ycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)				
	Primary X General Other (specify)		300.00					
C.	Full Name (Last, First, Middle Initial) Robert Hagan			Date of Receipt				
	Mailing Address 10975 Stroup Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: 61123.C9764				
	Roswell	βA	30075	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	<u>;</u>		500.00				
	rederal political committee.			Receipt				
	None ' '	cupation		Limit Increased Due to Opponent's				
		lunteer	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
	Primary X General	COLIOIT		1				
	Other (specify) ▼		1500.00					
				1200.00				
S	UBTOTAL of Receipts This Page (optional)			12000				
Т	OTAL This Period (last page this line number only)							

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 64
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   11d   12   12   13a   13b   14   15
Ar	ny information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Price for Congress			
۸.	Full Name (Last, First, Middle Initial) Dale Harman			Date of Receipt
	Mailing Address 615 Tuxedo Pl. NW			10 26 2006
	City	State	Zip Code	Transaction ID: 61026.C9658
	Atlanta	GA	30342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer	Occupation	1	Receipt
	None	Retired	•	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		450.00	
	Other (specify) ▼	0 0	450.00	
3.	Full Name (Last, First, Middle Initial) Suzanne Harvin			Date of Receipt
	Mailing Address 2204 Lattimore Farm Dr I	NW		11 06 7 2006
	City	State	Zip Code	Transaction ID: 61123.C9756
	Kennesaw	GA	30152-4738	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		230.00
	Name of Employer	Occupation	1	Receipt
	Information Requested		on Requested	Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		250.00	
	Other (specify) ▼	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Richard Hausner			Date of Receipt
	Mailing Address 7941 Katy Fwy			M M / D D / Y Y Y Y
				10 31 2006
	City	State	Zip Code	Transaction ID: 61102.C9668
	Houston	TX	77024-1924	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Self	Occupation	1	Receipt
	Seil	Physician	1	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Speriding (2 0.3.0. 441a(1)/441a-1)
	Primary X General	· · ·	250.00	
	Other (specify) ▼	0 0		
s	UBTOTAL of Receipts This Page (optional)			600.00
т	OTAL This Period (last nage this line number only	v)	<b>•</b>	

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 64 (check only one)  X 11a 11b 11c 11d
			Detailed Summary Fage	12 13a 13b 14 15
Ar	ny information copied from such Reports and Strong for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Price for Congress		71	
A.	Full Name (Last, First, Middle Initial) Alvin Head  Mailing Address PO Box 14787  City  Augusta  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed	State GA C		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: 2006  Primary X General  Other (specify) ▼	Physician Election C	ocycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial)  B. Ella Helm  Mailing Address 3385 Hallmark Drive, SE.				Date of Receipt  1 1 0 6 2 0 0 6
	City	State	Zip Code	Transaction ID: 61123.C9766
	<u>Marietta</u>	GA	30067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer None	Occupation Retired	n	Limit Increased Due to Opponent's
	Receipt For: 2006  Primary X General  Other (specify) ▼		Sycle-to-Date ▼ 950.00	Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial)			Data of Danaint
C.	Randolph Houchins  Mailing Address 5575 Preserve Circle			Date of Receipt    M
	City	State	Zip Code	Transaction ID: 61102.C9707
	Alpharetta	GA	30005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00 Receipt
	Name of Employer Cellnet Technology, Inc.	Occupation Attorney	n	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 260.00	Sperialing (2 0.3.0. 441a(1)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			370.00
Т	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X   11a   11b   11c   11d   15   15   15   16   17   17   17   18   18   18   18   18	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions	
$\setminus$	NAME OF COMMITTEE (In Full)				
$\geq$	Price for Congress				
A.	Full Name (Last, First, Middle Initial) Douglas Huber			Date of Receipt	
	Mailing Address 795 Tanglewood Trail,	NW.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 61102.C9736	
	Atlanta	GA	30327	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer Wellstar Physicians Group	Occupatio Physicia		Receipt  Limit Increased Due to Opponent's	
	Receipt For: 2006	, , , , , , , , , , , , , , , , , , , ,	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General Other (specify) ▼	0 0	3500.00		
В.	Full Name (Last, First, Middle Initial) Frank Joseph			Date of Receipt	
	Mailing Address 1605 Brandon Hall Dr	11 02 7 7 9 9			
	City	State Zip Code			
	Atlanta	GA	30350	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Resurgens Orthopaedics	Occupatio Physicia		Receipt  Limit Increased Due to Opponent's	
	Receipt For: 2006		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General Other (specify) ▼		1750.00	]	
<u> </u>	Full Name (Last, First, Middle Initial) J. Lex Kenerly	1		Date of Receipt	
	Mailing Address 811 S 1st St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 61102.C9735	
	Jesup	GA	31545-0209	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer	Occupatio	n	Receipt	
	Self		edic Surgeon	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 0.3.0. 441a(I)/441a-1)	
	Primary X General Other (specify) ▼		250.00		
s	UBTOTAL of Receipts This Page (optional)			1500.00	
Н	OTAL This Period (last page this line number				

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 23 / 64   (check only one)
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Dale Lane Mailing Address 14890 E. Bluff Road  City Alpharetta  FEC ID number of contributing federal political committee.  Name of Employer Resurgens Orthopaedics  Receipt For: 2006	State GA  C  Occupation Physician Election C		Date of Receipt    M   M   26   2006   Transaction ID: 61026.C9663   Amount of Each Receipt this Period   250.00   Receipt   Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	Liection	250.00	
В.	Full Name (Last, First, Middle Initial) Ronald Lepoff  Mailing Address 2964 S Milwaukee Cir  City  Denver  FEC ID number of contributing federal political committee.  Name of Employer University of Colorado Health  Receipt For: 2006  Primary X General  Other (specify)	State CO C Occupation Physician Election C		Date of Receipt    M M
C.	Full Name (Last, First, Middle Initial)  Morton Levitt  Mailing Address 135 Thistlewood Ct  City  Tallahassee  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: 2006  Primary X General  Other (specify)	State FL  C  Occupation Physician Election C		Date of Receipt    M   M   D   D   2006   Transaction ID: 61102.C9697   Amount of Each Receipt this Period   250.00   Receipt   Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	SUBTOTAL of Receipts This Page (optional)			750.00
Т	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24 / 64 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
Ar	ny information copied from such Reports and Statemen	its may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the name a	nd add	iress of any political committee to	solicit contributions from such committee.
$  \setminus $	NAME OF COMMITTEE (In Full)			
/	Price for Congress			
<u></u>	Full Name (Last, First, Middle Initial)			
A.	Orlando Lopez, MD			Date of Receipt
	Mailing Address 8701 Shoreline Drive			M M / D D / Y Y Y Y
	Cit.	oto	7in Code	11 02 2006
	City Sta Jonesboro G/	ate ∧	Zip Code 30236	Transaction ID: 61102.C9686
	FFO ID combined for all the first		30230	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			250.00
		_		Receipt
	Atlanta Urológical Inetit	upation		Limit Increased Due to Opponent's
	<u>ute</u>	siciar	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		yolo to bate V	1
	Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial)			B (B
В.		١٨/		Date of Receipt
	Mailing Address 6266 Mountain Brook Way N	1 1 2 0 Y Y Y Y Y Y Y		
	City Sta	ate	Zip Code	Transaction ID: 61123.C9802
	Atlanta G/	Α	30328	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee			300.00
	federal political committee.			000.00
	Name of Employer Occi	upation	1	Receipt
	None			Limit Increased Due to Opponent's
		ction C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		300.00	1
	Other (specify) ▼		000.00	
_	Full Name (Last, First, Middle Initial)			+
C.	Charles McFarland			Date of Receipt
	Mailing Address 10190 Shallowford Road			M M / D D / Y Y Y Y
	City	ate	Zip Code	11 06 2006
	City Sta Roswell Ga		30075	Transaction ID: 61123.C9768  Amount of Each Receipt this Period
	EEC ID number of contributing		00073	
	FEC ID number of contributing federal political committee.	١.		300.00
				Receipt
	Name of Employer Occi None Reti	upation	1	Limit Increased Due to Opponent's
			ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		Join to Bato V	1
	Other (specify) ▼		400.00	
_				
				850.00
S	UBTOTAL of Receipts This Page (optional)			630.00
_	OTAL This Davied (lost page this line asserts)			
1 1	OTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 64 (check only one)  X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) Price for Congress			
Full Name (Last, First, Middle Initial) Richard Meeder  Mailing Address 24 Revival Street  City Roswell  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: 2006  Primary X General Other (specify)		Zip Code 30075  In fion Requested Cycle-to-Date ▼ 350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Robert Nesbitt Mailing Address 1189 Stoneheath Model City	ews	Zip Code	Date of Receipt    M
Marietta FEC ID number of contributing federal political committee.	GA C	30068	Amount of Each Receipt this Period  100.00
Name of Employer None  Receipt For: 2006  Primary X General  Other (specify) ▼	Occupation Retired  Election C	Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Joe Newton  Mailing Address 1810 Park Colony D	)r		Date of Receipt  1 0 2 6 2 0 0 6
City	State	Zip Code	Transaction ID: 61026.C9662
Norcross  FEC ID number of contributing federal political committee.	GA C	30093-1671	Amount of Each Receipt this Period  500.00
Name of Employer Information Requested  Receipt For: 2006 Primary X General		n ion Requested Cycle-to-Date ▼	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional  TOTAL This Period (last page this line number)		0 0 0 0 0 0 0	700.00

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 26 / 64   (check only one)   X   11a
			Detailed Summary Page	X   11a   11b   11c   11d   12   13a   13b   14   15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\geq$	Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Martha Oherlihy			Date of Receipt
	Mailing Address 5 Street Andrews Cros	sover		1 1 0 2 2 0 0 6
	City	State	Zip Code	Transaction ID: 61102.C9704
	Severna Park	MD	21146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Information Requested	Occupation		Receipt
	Receipt For: 2006		on Requested Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	Licotion	250.00	
В.	Full Name (Last, First, Middle Initial) Walter Orenstein			Date of Receipt
	Mailing Address 2500 Peachtree Rd NV	11 06 2006		
	City	State	Zip Code	Transaction ID: 61123.C9743
	Atlanta	GA	30305-5602	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Emory	Occupation		Receipt
			e Director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General	Election C	Cycle-to-Date ▼	
	Other (specify) ▼		500.00	
C.	Full Name (Last, First, Middle Initial) Alan Plummer			Date of Receipt
	Mailing Address The Emory Clinic 1365 Clifton Road, NE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 61102.C9695
	Atlanta	GA	30322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Emory University Clinic	Occupation		Receipt
		Physicia		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	cycle-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			650.00
Н	OTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27/64 (check only one)  X 11a 11b 11c 11d 12 13a 13b 14 15
Ar	ny information copied from such Reports and for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) James Robb, MD Mailing Address 11613 Kensington Co	Date of Receipt		
	City	1 1 0 6 2 0 0 6 Transaction ID: 61123.C9742		
	Boca Raton  FEC ID number of contributing federal political committee.	FL C	33428	Amount of Each Receipt this Period
	Name of Employer IRL Florida  Receipt For: 2006  Primary X General  Other (specify) ▼	Occupation Patholog  Election C		Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Ronald Robinson Mailing Address 70 Foal Drive			Date of Receipt
	City Roswell	State GA	Zip Code 30076	Transaction ID: 61123.C9763  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer None  Receipt For: 2006 Primary X General Other (specify)	Occupation Retired  Election C	Dycle-to-Date ▼ 425.00	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>c</b> .	Full Name (Last, First, Middle Initial) Sidney Rodbell			Date of Receipt
	Mailing Address 1101 Crest Valley Dr.	10 26 2006		
	City Atlanta	State GA	Zip Code 30327	Transaction ID: 61026.C9660  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Information Requested  Receipt For: 2006		n on Requested Cycle-to-Date	Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	LIECTION	250.00	
s	UBTOTAL of Receipts This Page (optional)			400.00
T	OTAL This Period (last page this line numbe	r only)		

S	CHEDULE A (FEC Form 3	, [		FOR LINE NUMBER: PAGE 28 / 64				
	•	′	Use separate schedule(s) or each category of the	(check only one)				
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d				
			Botanoa Garrinary Fago	12 13a 13b 14 15				
Ar	y information copied from such Reports and	d Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions				
or	for commercial purposes, other than using t	the name and add	lress of any political committee to	o solicit contributions from such committee.				
$\setminus$	NAME OF COMMITTEE (In Full)							
$  \rangle$	Price for Congress							
$\angle$								
	Full Name (Last, First, Middle Initial)			5. (5. ).				
Α.	Jared Schwartz			Date of Receipt				
	Mailing Address 3429 Wynington Dr			10 30 2006				
	City	Stata	Zin Codo					
	City	State	Zip Code	Transaction ID: 61030.C9665				
	Charlotte	NC	28226-1110	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		1000.00				
	federal political committee.							
	Name of Employer	Occupation	1	Receipt				
	Name of Employer Self-Employed	Physician		Limit Increased Due to Opponent's				
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
	Primary X General		,					
	Other (specify)		1000.00					
				_				
_	Full Name (Last, First, Middle Initial)							
В.	Lee Skandalakis			Date of Receipt				
	Mailing Address 5081 Riverwood Roa	ad		M M / D D / Y Y Y				
				11 20 2006				
	City	Transaction ID: 61123.C9792						
	Atlanta	GA	30327	Amount of Each Receipt this Period				
	FEC ID number of contributing			200.00				
	federal political committee.	C		200.00				
	Name of Caralana	0		Receipt				
	Name of Employer Self-Employed	Occupation Physician		Limit Increased Due to Opponent's				
	Receipt For: 2006			Spending (2 U.S.C. 441a(i)/441a-1)				
	Receipt For: 2006 Primary X General	Election C	ycle-to-Date ▼					
	Other (specify)		200.00					
	Carlot (oposity)	0 0		_				
	Full Name (Last, First, Middle Initial)							
C.	Mark Stephens			Date of Receipt				
	Mailing Address 575 Shirerokes Cour	rt		M M / D D / Y Y Y Y				
				10 26 2006				
	City	State	Zip Code	Transaction ID: 61026.C9653				
	Roswell	GA	30075	Amount of Each Receipt this Period				
	FEC ID number of contributing			000.00				
	federal political committee.	C		200.00				
		1		Receipt				
	Name of Employer Solvay Pharmaceuticals,	Occupation	1	Limit Increased Due to Opponent's				
	Inc.	Manager	unle te Dete	Spending (2 U.S.C. 441a(i)/441a-1)				
Receipt For: 2006		Election C	ycle-to-Date ▼					
	Primary X General Other (specify) ▼		1400.00					
	Cirici (apecily)	_						
_	IIDTOTAL of Descripto This Descripto 1	1400.00						
$\vdash$	UBTOTAL of Receipts This Page (optional)							
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1 1	OTAL This Period (last page this line numb	er orliy)						

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 29 / 64   (check only one)
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements mag	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Price for Congress		7.	
Α.	Full Name (Last, First, Middle Initial) Paula Szypko Mailing Address 1465 Double Creek Dr  City Lewisville  FEC ID number of contributing federal political committee.  Name of Employer North State Pathology Assoc. Receipt For: 2006 Primary X General	State NC C Occupatio Patholog Election C		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
— В.	Other (specify)  Full Name (Last, First, Middle Initial) Hugh Thompson, MD	0 0	230.00	Date of Receipt
	Mailing Address 707 Highway 314  City  Fayetteville  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: 2006  Primary X General  Other (specify) ▼	State GA  C  Occupatio Physicial Election C		Transaction ID: 61102.C9682  Amount of Each Receipt this Period  100.00  Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
c.	Full Name (Last, First, Middle Initial) Jerry Twiggs, MD Mailing Address 1803 East Boulder Spr  City Saint George  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: 2006  Primary X General Other (specify) ▼	State UT C Occupatio Physicia		Date of Receipt    M M
s	SUBTOTAL of Receipts This Page (optional)			450.00
_	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 64			
ITEMIZED RECEIPTS		or each category of the	(check only one)			
		Detailed Summary Page	X   11a   11b   11c   11d   15   12   13a   13b   14   15			
Any information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions			
or for commercial purposes, other than using the r	name and add	ress of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
Price for Congress						
Full Name (Last, First, Middle Initial)						
A. Albert Wickman						
Mailing Address 1952 Chartwell Ct	11 02 2006					
City	Transaction ID: 61102.C9678					
<u>Marietta</u>	GA	Zip Code 30066-4592	Amount of Each Receipt this Period			
FEC ID number of contributing			100.00			
federal political committee.	C		100.00			
Name of Employer	Occupation	1	Receipt			
None	Retired		Limit Increased Due to Opponent's			
Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General Other (specify) ▼		300.00				
□ Outer (specify) ₩	0 0		1			
Full Name (Last, First, Middle Initial)			Date of Receipt			
Mailing Address 210 Mynatona Way	_ ·					
Mailing Address 310 Wynstone Way	Mailing Address 310 Wynstone Way					
City	State	Zip Code	Transaction ID: 61102.C9729			
<u>Duluth</u>	GA	30097	Amount of Each Receipt this Period			
FEC ID number of contributing	С		50.00			
federal political committee.						
Name of Employer Pilgrims Pride	Occupation	1	Receipt			
	Accounta		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 Primary X General	Election C	ycle-to-Date ▼				
Other (specify)		400.00				
			1			
Full Name (Last, First, Middle Initial)			Date of Resolut			
Alan Wilde, MD Mailing Address 8542 Windsor Way			Date of Receipt			
			11 02 2006			
City	State	Zip Code	Transaction ID: 61102.C9679			
Broadview Heights	OH	44147	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		75.00			
			Receipt			
Name of Employer Lutheran Hospital	Occupation		· ·			
Receipt For: 2006	Physician Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Primary X General	FIECTION C	ycle-to-Date ▼	1			
Other (specify)		575.00				
CURTOTAL of Descints This Desc (antional)		_	225.00			
SUBTOTAL of Receipts This Page (optional)		<u> </u>				
TOTAL This Period (last page this line number o	only)	<b>)</b>				

SCHEDULE A (FEC Form 3			Llac concrete cohodulo(a)	FOR LINE NUMBER: PAGE 31 / 64				
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)				
ITEMIZED RECEIPTS			Detailed Summary Page	X   11a   11b   11c   11d				
				12 13a 13b 14 15				
An	y information copied from such Reports and for commercial purposes, other than using the	on for the purpose of soliciting contributions of solicit contributions from such committee.						
abla	NAME OF COMMITTEE (In Full)							
$\rangle$	Price for Congress							
Α.	Full Name (Last, First, Middle Initial) Sam Wilson			Date of Receipt				
	Mailing Address 10917 Georgetown P	ike		11 20 7 2006				
	City	State	Zip Code	Transaction ID: 61123.C9796				
	Great Falls	VA	22066	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer Arthritis & Sports Orthop-	Occupation Physician		Receipt  Limit Increased Due to Opponent's				
	aedic Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
	Primary X General		50.00					
	Other (specify) ▼	0 0	50.00	_				
В.	Full Name (Last, First, Middle Initial) L.D. Wright			Date of Receipt				
	Mailing Address PO Box 998			1 1 0 6 2 0 0 6				
	City	State	Zip Code	Transaction ID: 61123.C9760				
	Charleston	SC	29402-0998	Amount of Each Receipt this Period				
	Charleston FEC ID number of contributing federal political committee.	C	29402-0998	250.00				
	FEC ID number of contributing federal political committee.  Name of Employer	C		250.00  Receipt				
	FEC ID number of contributing federal political committee.  Name of Employer None	Occupation Retired	1	250.00				
	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006	Occupation Retired		Receipt Limit Increased Due to Opponent's				
	FEC ID number of contributing federal political committee.  Name of Employer None	Occupation Retired	1	Receipt Limit Increased Due to Opponent's				
	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General	Occupation Retired	n Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's				
C.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial)	Occupation Retired Election C	n Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
c.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa	Occupation Retired Election C	n Sycle-to-Date ▼	250.00  Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  Date of Receipt				
C.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa	Occupation Retired Election C	n sycle-to-Date ▼ 250.00	Date of Receipt  Date of Receipt  250.00  Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  Date of Receipt  250.00  A				
c.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa	Occupation Retired Election C	zycle-to-Date ▼ 250.00  Zip Code	Date of Receipt  Date of Receipt  Transaction ID: 61023.C9639  Amount of Each Receipt this Period				
C.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa  City Gallipolis  FEC ID number of contributing	C Occupation Retired Election C d State OH C Occupation	Zip Code 45631	Date of Receipt  Date of Receipt  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Receipt  Limit Increased Due to Opponent's  1 0 2 3 2 0 0 6  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Limit Increased Due to Opponent's				
<b>C</b> .	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Road City Gallipolis  FEC ID number of contributing federal political committee.	C Occupation Retired Election C C C Occupation Physician	Zip Code 45631	Date of Receipt  Date of Receipt  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Receipt				
c.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa  City Gallipolis  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed	C Occupation Retired Election C C C Occupation Physician	Zip Code 45631	Date of Receipt  Date of Receipt  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Receipt  Limit Increased Due to Opponent's  1 0 2 3 2 0 0 6  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Limit Increased Due to Opponent's				
c.	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa  City Gallipolis  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: 2006 Primary X General	C Occupation Retired Election C C C Occupation Physician	Zip Code 45631	Pate of Receipt  Date of Receipt  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  100.00  Receipt  Limit Increased Due to Opponent's 2 0 0 6  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  100.00  Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
	FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: 2006 Primary X General Other (specify)  Full Name (Last, First, Middle Initial) Larry Yodlowski, MD  Mailing Address 535 Buhl Morton Roa  City Gallipolis  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: 2006 Primary X General	C Occupation Retired Election C  State OH  C Occupation Physician Election C	Zip Code 45631	Date of Receipt  Date of Receipt  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Receipt  Limit Increased Due to Opponent's  1 0 2 3 2 0 0 6  Transaction ID: 61023.C9639  Amount of Each Receipt this Period  Limit Increased Due to Opponent's				

FOR LINE NUMBER: PAGE 32/64 SCHEDULE A (FEC Form 3 ) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Price for Congress Full Name (Last, First, Middle Initial) A. Hayworth for Congress Date of Receipt Mailing Address 14300 N Northsight Blvd Ste 105 1.1 21 2006 City State Zip Code Transaction ID: 61123.C9803 Scottsdale ΑZ 85260-3673 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Offsets to Operating Expe-Name of Employer Occupation nditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date Primary X General 2000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2000.00
TOTAL This Period (last page this line number only)	<b>•</b>	2000.00

SCHEDULE A (FEC Form 3 )	Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 64			
ITEMIZED RECEIPTS	or each category of the	(check only one)			
· · · · · · · · · · · · · · · · · · ·	Detailed Summary Page	11a 11b 11c 11d 12 13a 13b 14 X 15			
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)					
Price for Congress					
Full Name (Last, First, Middle Initial)  A. Bank of North Georgia		Date of Receipt			
	Mailing Address 8025 Westside Parkway				
City <u>A</u> lpharetta	State Zip Code GA 30004-	Transaction ID: 61123.C9777  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	74.00			
Name of Employer	Occupation	Other Receipt  Limit Increased Due to Opponent's			
Receipt For: 2006  Primary X General  Other (specify) ▼	Election Cycle-to-Date ▼ 6112.08	Spending (2 U.S.C. 441a(i)/441a-1)			
Full Name (Last, First, Middle Initial)  Bank of North Georgia		Date of Receipt			
Mailing Address 8025 Westside Parkwa	111 / 05 / Y Y Y Y Y Y				
City Alpharetta	State Zip Code GA 30004-	Transaction ID: 61123.C9775			
FEC ID number of contributing		Amount of Each Receipt this Period			
federal political committee.	C	2969.22  Other Receipt			
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 Primary X General	Election Cycle-to-Date ▼	Spending (2 0.5.0. 441a(1)/441a-1)			
Other (specify)	9081.30				
Full Name (Last, First, Middle Initial)  Bank of North Georgia		Date of Receipt			
Mailing Address 8025 Westside Parkwa	у	11 1 14 2006			
City	State Zip Code	Transaction ID: 61123.C9776			
Alpharetta	GA 30004-	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1734.04  Other Receipt			
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 0.5.0. 441a(1)/441a-1)			
Primary X General Other (specify) ▼	10815.34				
SUBTOTAL of Receipts This Page (optional)		4777.26			
TOTAL This Period (last page this line number of	only)	4777.26			
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nag	e# 26930603873													
	CHEDULE B (FEC Form 3 )	Use seperate so		FOR LINE	E NUMBER: PAGE 34 / 64									
"	EMIZED DISBURSEMENTS	for each categor Detailed Summa		1 ` -	X 17 20a		18 20b	19a 20c		19b 21				
	y Information copied from such Reports and Sta for commercial purposes, other than using the r													
	NAME OF COMMITTEE (In Full) Price for Congress													
Α.	Full Name (Last, First, Middle Initial) ADP		Transaction ID: 61102.E1432 Date of Disbursement											
	Mailing Address 1 ADP Blvd.	10 26 7 2006					006							
	City Roseland	State Zip C NJ 070			Amoui	nt of	Each	Disburse	men	t this Period				
	Purpose of Disbursement PAYROLL EXPENSE							sposal of						
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53									
	Office Sought: House Disb Senate President	Primary Other (specify)	General		PAYR	OLL	_ EXP	ENSE						
	State: District:													
В.	Full Name (Last, First, Middle Initial) ADP						on ID: sburse	61102.E ment	∃14	37				
	Mailing Address 1 ADP Blvd.	10 31 / 2006												
	City Roseland	State Zip Code and NJ 07068-								Amount of Each Disbursement this Period				
	Purpose of Disbursement PAYROLL TAXES	•	2163.93  Refund or Disposal of Excess											
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53											
	Office Sought: House Disb Senate President	ursement For: Primary Other (specify)	General		PAYR	OLL	_ TAX	ES						
	State: District:													
C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 61123.E1465 Date of Disbursement												
	Mailing Address P.O. Box 360001	M M M M M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B B M A B				0 0 6								
	City Fort Lauderdale	State Zip C			Amoui	nt of	Each I	Disburse	men	t this Period				
	Purpose of Disbursement TRANSACTION FEES	•	Re	efund	l or Dis	sposal of	Exc	162.23						
	Candidate Name		Category/	L Co	ontrib		Require							

General

Disbursement For:

Primary

Other (specify)

Туре

TRANSACTION FEES

House

Senate

President

Office Sought:

_	01150111507556									
SCHEDULE B (FEC Form 3 )			Use sepe	erate schedule(s)		NUMBER: PAGE 35 / 64				
IT	ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			ly one)				
	y Information copied from such Reports a for commercial purposes, other than usin					for the purpose of solicating contributions				
abla	NAME OF COMMITTEE (In Full)									
$ \rangle$	Price for Congress									
Α.	Full Name (Last, First, Middle Initial) Anthem Media					Transaction ID: 61123.E1464 Date of Disbursement				
	Mailing Address 2700 Via Fortun	a				10 19 / 2006				
	City Austin		State TX	Zip Code 78746-7911		Amount of Each Disbursement this Period				
	Purpose of Disbursement MEDIA BUY					35470.00  Refund or Disposal of Excess				
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General		MEDIA BUY				
	State: District:		(-	·-··//						
В.	Full Name (Last, First, Middle Initial) Aristotle, Inc.					Transaction ID: 61030.E1406 Date of Disbursement				
	Mailing Address 205 Pennsylvan	M M / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City		State DC	Zip Code 20003-		Amount of Each Disbursement this Period				
	Washington Purpose of Disbursement TRANSACTION FEES			26.50						
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General ccify) ▼		TRANSACTION FEES				
	State: District:									
C.	Full Name (Last, First, Middle Initial) Aristotle, Inc.					Transaction ID: 61123.E1438 Date of Disbursement				
	Mailing Address 205 Pennsylvan	ia Avenue	e, SE			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Washington		State DC	Zip Code 20003-		Amount of Each Disbursement this Period				
	Purpose of Disbursement TRANSACTION FEES					23.00  Refund or Disposal of Excess				
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General		TRANSACTION FEES				
	State: District:		Other (spe	.∵y) <b>▼</b>						
s	UBTOTAL of Disbursements This Page	(optional)			<b></b>	35519.50				

TOTAL This Period (last page this line number only) ......

iiay	20930003073				
	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	for each	erate schedule(s) category of the Summary Page	(check onl	NUMBER: PAGE 36 / 64 y one)  X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and State for commercial purposes, other than using the nan				for the purpose of solicating contributions
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress				
Α.	Full Name (Last, First, Middle Initial) Aristotle, Inc.  Mailing Address 205 Pennsylvania Avenu	ue SF			Transaction ID: 61123.E1442 Date of Disbursement  111
	City Washington Purpose of Disbursement TRANSACTION FEES	State DC	Zip Code 20003-		Amount of Each Disbursement this Period  154.00  Refund or Disposal of Excess Contributions Required Under
	Candidate Name  Office Sought: House Senate President  State: District:	ement For: Primary Other (spe	General ecify) ▼	Category/ Type	11 C.F.R. 400.53  TRANSACTION FEES
В.	Full Name (Last, First, Middle Initial) Bank of North Georgia  Mailing Address 8025 Westside Parkway	′			Transaction ID: 61123.E1443 Date of Disbursement    M
	City Alpharetta Purpose of Disbursement SEE BELOW Candidate Name	State GA	Zip Code 30004-	Category/	Amount of Each Disbursement this Period  3145.05  Refund or Disposal of Excess Contributions Required Under
	Office Sought:    House   Disburs	sement For: Primary Other (spe	General ecify) ▼	Туре	11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) BLS Limo Group  Mailing Address 2120 W Virginia Ave NE	=			Transaction ID: 61123.E1450 Date of Disbursement  1 1 0 2 0 0 6
	City Washington  Purpose of Disbursement TRANSPORTATION  Candidate Name  Office Sought: House Senate President State: District:	State DC sement For: Primary Other (spe	Zip Code 20002-1834 General	Category/ Type	Amount of Each Disbursement this Period  425.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  [MEMO ITEM]  MEMO: TRANSPORTATION
	IIRTOTAL of Disburgements This Page (entianal)			<b>.</b>	3299.05
LS	<b>UBTOTAL</b> of Disbursements This Page (optional)				02000

TOTAL This Period (last page this line number only) ......

S	CHEDULE B (FEC Form 3 )		FOR LINE	NUMBER: PAGE 37 / 64						
	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	(check onl	y one)						
		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21						
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
Λ	NAME OF COMMITTEE (In Full)									
V	Price for Congress									
Α.	Full Name (Last, First, Middle Initial) Cingular Wireless			Transaction ID: 61123.E1448  Date of Disbursement  1 1 0 2 0 6						
	Mailing Address P.O. Box 30523			11 10 2006						
	•	State Zip Code FL 33630-		Amount of Each Disbursement this Period						
	Purpose of Disbursement TELEPHONE			190.77  Refund or Disposal of Excess						
	Candidate Name	e Name Category/								
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	11 C.F.R. 400.53  [MEMO ITEM]  MEMO: TELEPHONE						
	State: District:									
В.	Full Name (Last, First, Middle Initial) Delta Airlines			Transaction ID: 61123.E1447 Date of Disbursement						
	Mailing Address Hartsfield International A	irport		111						
	•	State Zip Code GA 30320-		Amount of Each Disbursement this Period						
	Purpose of Disbursement TRAVEL EXPENSE		806.39  Refund or Disposal of Excess							
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: TRAVEL EXPENSE						
	State: District:									
C.	Full Name (Last, First, Middle Initial) Federal Express			Transaction ID: 61123.E1454 Date of Disbursement						
	Mailing Address 100 Galleria Parkway			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D \\ 1 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$						
		State Zip Code GA 30339-		Amount of Each Disbursement this Period						
	Purpose of Disbursement SHIPPING			13.34  Refund or Disposal of Excess						
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	, , , , , , , , , , , , , , , , , , ,	MEMO: SHIPPING						
_	State: District:	Outer (specify)								
s	UBTOTAL of Disbursements This Page (optional) .		<b></b>	0.00						

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S	CHEDULE B (FEC Form 3)	Use sene	erate schedule(s)		NUMBER: PAGE 38/64
IT	EMIZED DISBURSEMENTS	for each	category of the	(check onl	
		Detailed	Summary Page	1 1	X 17   18   19a   19b   20a   20b   20c   21
	y Information copied from such Reports and Stater				for the purpose of solicating contributions
or	for commercial purposes, other than using the nam	e and addre	ss of any political	committee to so	plicit contributions from such committee
Ν	NAME OF COMMITTEE (In Full)				
/	Price for Congress				
<u></u>	Full Name (Last, First, Middle Initial)				Transaction ID: 61123.E1451
Α.	Georgia World Congress Center	Date of Disbursement			
	Mailing Address 285 Andrew Young Inter		111 / 10 / 20066		
	City Atlanta	State GA	Zip Code 30313-1513		Amount of Each Disbursement this Period
	Purpose of Disbursement	<u> </u>	1010		382.32
	EVENT CATERING				Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under
				Type	11 C.F.R. 400.53 [MEMO ITEM]
	* H	ement For:			MEMO: EVENT CATERING
	Senate	Primary	General		
	President State: District:	Other (spe	ecity) 🔻		
_	Full Name (Last, First, Middle Initial)				
В.					Transaction ID: 61123.E1449 Date of Disbursement
	Mailing Address 1237 Johnson Ferry Roa	ad			111 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			Zip Code		Array and of Frank Disk was array to this David
	City Marietta	State GA	30068-		Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	43.41			
	Candidate Name	Refund or Disposal of Excess Contributions Required Under			
		Category/ Type	11 C.F.R. 400.53		
	* H	ement For:			[MEMO ITEM]  MEMO: OFFICE SUPPLIES
	Senate	Primary	General		
	President State: District:	Other (spe	ecity) 🔻		
	Full Name (Last, First, Middle Initial)				
C.	USPS				Transaction ID: 61123.E1453 Date of Disbursement
	Mailing Address 10719 Alpharetta Highw	ay			11 M / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code		Amount of Each Disbursement this Period
	Roswell	GA	30076-		78.00
	Purpose of Disbursement POSTAGE			•	Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburs	ement For:	l	71 -	[MEMO ITEM]
	Senate	Primary	General		MEMO: POSTAGE
	President	Other (spe	ecify) 🔻		
_	State: District:				
					0.00
S	UBTOTAL of Disbursements This Page (optional)				0.00

S	CHEDULE B (FEC Form 3)		1.	ODLINE	NII INADE	D.				1400	. 20 / 64
	•	Use seperate schedule(s)		OR LINE check only		n.				AGE	39 / 64
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			17 20a		18 20b		19a 20a		19b 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										
Λ	NAME OF COMMITTEE (In Full)										
/	Price for Congress										
Α.	Full Name (Last, First, Middle Initial) Washington Court Hotel			<b>Trans</b> Date of				31123 ment	.E14	152	
	Mailing Address 525 New Jersey Ave NW	1			1 1	М	/ D	1	0 /	Y	2006
		State         Zip Code           DC         20001-2019			Amou	int o	f Eac	h [	Disburs	eme	nt this Period
	Purpose of Disbursement TRAVEL EXPENSE				775.17  Refund or Disposal of Excess						cess
	Candidate Name			egory/ /pe	11	C.F	F.R. 4	00	Requir ).53	ed U	nder
	Senate President	ement For: Primary General Other (specify)			MEMO: TRAVEL EXPENSE						
	State: District:										
В.	Full Name (Last, First, Middle Initial) Bank of North Georgia		<b>Trans</b> Date of		-		61123 ment	.E14	166		
	Mailing Address 8025 Westside Parkway				м 1 1	М	/ D	2	D /	Y	2006
	•	State Zip Code GA 30004-			Amount of Each Disbursement th						
	Purpose of Disbursement LOAN INTEREST						posal	of Exc			
	Candidate Name			egory/ vpe			butior F.R. 4		Requir ).53	ed U	nder
	Office Sought: House Disburse Senate President	ement For:    Primary   General     Other (specify)			LOAN	I IN	TER	E	ST		
	State: District:										
C.	Full Name (Last, First, Middle Initial) Bankcard				Trans Date of				61202 ment	.E14	190
	Mailing Address 5701 Lindero Canyon Rd	I., Bldg. 3			1 1	М	/ D	0	<sup>D</sup> /	Y	2006
	•	State Zip Code CA 91362-			Amou	int o	f Eac	h [	Disburs	seme	nt this Period
	Purpose of Disbursement			•							153.04
	SERVICE FEES Candidate Name		egory/ /pe	L Co	ontri		าร	posal o Requir ).53			
	Office Sought: House Disburse Senate	ement For: Primary General	,		SERV	/ICE	FE	ES	3		
	President State: District:	Other (specify) ▼									
s	<b>UBTOTAL</b> of Disbursements This Page (optional) .			. <u> </u>							929.08

nage	e# 26930603879													
	CHEDULE B (FEC For EMIZED DISBURSEM	-	for each	erate schedule(s) category of the Summary Page	FOR LINE (check only	-	R:	19 20	a [	40 / 64 19b 21				
	y Information copied from such Refor commercial purposes, other tha					or the pu	rpose of s	solicating	contr	ibutions				
	NAME OF COMMITTEE (In Full) Price for Congress	<u> </u>		,,										
Α.	Full Name (Last, First, Middle Initi BellSouth  Mailing Address P.O. Box 1					Transaction ID: 61102.E1407 Date of Disbursement  10 26 2006								
	City Alpharetta		State GA	Zip Code 30023-		Amou	int of Eacl	n Disbur	semer	nt this Period				
	Purpose of Disbursement TELEPHONE Candidate Name				Category/ Type	C	efund or E ontribution C.F.R. 4	ıs Requi						
	Office Sought: House Senate President State: District:	Disburse	ement For: Primary Other (spe	General ♥	7,7,2	TELE	PHONE							
В.	Full Name (Last, First, Middle Initi Capitol Hill Club Mailing Address 300 First S					Date	saction ID of Disburs			08 2 0 0 6 °				
	City Washington Purpose of Disbursement EVENT CATERING Candidate Name		State DC	Zip Code 20003-	Category/ Type	Re	efund or E ontribution C.F.R. 4	Disposal as Requi	of Exc					
	Office Sought:  House Senate President State:  District:	Disburse	ement For: Primary Other (spe	General ecify)		EVEN	IT CATE	RING						
C.	Full Name (Last, First, Middle Initi Cherokee Ledger News Mailing Address 103 E Mair	,					eaction ID of Disburs			09 2 0 0 6 °				
	City Woodstock Purpose of Disbursement ADVERTISING Candidate Name		State GA	Zip Code 30188-5008	Category/ Type	Re	efund or E contribution C.F.R. 4	Disposal as Requi	of Exc					
	Office Sought:  House Senate President State: District:	Disburse	ement For: Primary Other (spe	General cify) ▼		ADVE	ERTISIN	G						

2888.33

SUBTOTAL of Disbursements This Page (optional) .....

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S	CHEDULE B (FEC Form 3)	Use sep	erate schedule(s)	_	E NUMBER: PAGE 41 / 64 nly one)							
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	I `	X 17 18 19a 19b 20a 20b 20c 21							
	y Information copied from such Reports and S for commercial purposes, other than using the											
$\setminus$	NAME OF COMMITTEE (In Full)											
/	Price for Congress											
Α.	Full Name (Last, First, Middle Initial) Cingular Wireless				Transaction ID: 61123.E1446 Date of Disbursement							
	Mailing Address P.O. Box 30523				111							
	City Tampa	State FL	Zip Code 33630-		Amount of Each Disbursement this Period							
	Purpose of Disbursement TELEPHONE			•	238.50  Refund or Disposal of Excess							
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Dis Senate President	bursement For: Primary Other (sp	General		TELEPHONE							
	State: District:	oo. (op	<b>30</b> , <b>√</b>									
В.	Full Name (Last, First, Middle Initial) Digital X Press		Transaction ID: 61102.E1410 Date of Disbursement									
	Mailing Address PO Box 545				10							
	City Denville	State NJ	Zip Code 07834-0545		Amount of Each Disbursement this Period							
	Purpose of Disbursement PRINTING	• •	365.90  Refund or Disposal of Excess									
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53									
	Office Sought: House Dis Senate President	bursement For: Primary Other (sp	General ecify) ▼		PRINTING							
	State: District:											
C.	Full Name (Last, First, Middle Initial) Will Gurley Realty				Transaction ID: 61102.E1414 Date of Disbursement							
	Mailing Address 3901 Roswell Road,	Ste. 132			10							
	City Marietta	State GA	Zip Code 30062-		Amount of Each Disbursement this Period							
	Purpose of Disbursement RENT			* *	1000.00  Refund or Disposal of Excess							
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53							
	Office Sought: House Dis Senate President	bursement For: Primary Other (sp	General ecify) ▼		RENT							
_	State: District:											
s	UBTOTAL of Disbursements This Page (opti	onal)			1604.40							

S	CHEDULE B (FEC Form 3)		EOD LINE	INE NUMBER: PAGE 42 / 64							
	•	Use seperate schedule(s)	(check only								
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			X 17 20a		18 20b	19 20		19b 21	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										
abla	NAME OF COMMITTEE (In Full)										
$ \rangle$	Price for Congress										
A.	Full Name (Last, First, Middle Initial) Jeffrey Hamling				<b>Trans</b> Date of			61102 ement	2.E14	133	
	Mailing Address 3221 Post Woods Dr Apt	:1			1 <sup>M</sup> 0	М	<sup>D</sup> 3	<b>1</b> /	Y	2006	
		State Zip Code GA 30339-5529			Amount of Each Disbursement this Perio						
	Purpose of Disbursement SALARY		Г		Re	efun	d or Di	sposal	of Exc	1280.25 cess	
	Candidate Name			ategory/ Type			outions R. 40	Requi 0.53	ed U	nder	
	Senate President	ment For: Primary General Other (specify)			SALA	RY					
	State: District:										
В.	Full Name (Last, First, Middle Initial) Jenny McCallum						sburse		2.E14	134	
	Mailing Address 2943 Bentwood Dr				1 <sup>M</sup> 0	М	<sup>D</sup> 3	1 /	Y	2006	
	City Sarietta		Amou	nt of	Each	Disbur	seme	nt this Period			
	Purpose of Disbursement SALARY					sposal	of Exc				
	Candidate Name			ategory/ Type			outions R. 40	Requi 0.53	ed U	nder	
	Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)			SALARY						
	State: District:	Culor (opcomy)									
С.	Full Name (Last, First, Middle Initial) Jenny McCallum				Trans Date of			61123 ement	3.E14	163	
	Mailing Address 2943 Bentwood Dr				1 1	М	<sup>D</sup> 2	0 /	Y	2006	
		State Zip Code GA 30062-4608			Amou	nt of	Each	Disbur	seme	nt this Period	
	Purpose of Disbursement MILEAGE REIMBURSEMENT							400.00			
	Candidate Name			ategory/ Type	L Co	ontril		sposal Requi 0.53			
	Senate	ement For: Primary General	MII FAGE REIMBLIE				MBUR	SEM	IENT		
	President State: District:	Other (specify)									
s	UBTOTAL of Disbursements This Page (optional) .		<u></u>	<u>►</u>						2841.58	

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	CHEDULE B (FEC Form 3)		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 43 / 64
IT	EMIZED DISBURSEMENTS		category of the Summary Page	_ i `	X 17 18 19a 19b
		Detailed	Outilinary rage		20a 20b 20c 21
	y Information copied from such Reports and State for commercial purposes, other than using the na				
$\setminus$	NAME OF COMMITTEE (In Full)				
/	Price for Congress				
<u></u>	Full Name (Last, First, Middle Initial)				Transaction ID: C1000 F1400
A.	Neighbor Newspapers				Transaction ID: 61202.E1483  Date of Disbursement
	Mailing Address PO Box 449				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & N & G \\ Y & 2 & 0 & N & G \end{bmatrix} $
	City Marietta	State GA	Zip Code 30061-0449		Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISING				348.00
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbur	sement For:		туре	ADVEDTICING
	Senate	Primary	General		ADVERTISING
	President State: District:	Other (spe	ecify)		
_	Full Name (Last, First, Middle Initial)				Transaction ID: C100F F1000
В.	Neighbor Newspapers				Transaction ID: 61025.E1398  Date of Disbursement
	Mailing Address PO Box 449				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Marietta	State GA	Zip Code 30061-0449		Amount of Each Disbursement this Period
	Purpose of Disbursement	GA	30061-0449		348.00
	ADVERTISING				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbur	sement For: Primary	General		ADVERTISING
	President	Other (spe			
	State: District:				
C.	Full Name (Last, First, Middle Initial)				Transaction ID: 61123.E1459
Ο.	Neighbor Newspapers				Date of Disbursement
	Mailing Address PO Box 449				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Marietta	State GA	Zip Code 30061-0449		Amount of Each Disbursement this Period
	Purpose of Disbursement				2268.00
	ADVERTISING Candidate Name			Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbur	sement For:		Туре	
	Senate	Primary	General		ADVERTISING
	President State: District:	Other (spe	ecify) 🔻		
Г					
s	UBTOTAL of Disbursements This Page (optiona	l)			2964.00

·	20930003003			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check onl	NUMBER: PAGE 44 / 64 y one)  X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and S for commercial purposes, other than using the			for the purpose of solicating contributions
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Will OHara  Mailing Address 1 Wood Valley Dr S	N		Transaction ID: 61102.E1435 Date of Disbursement  M M M / D 3 1 / Y Y Y O Y O O O
	City Rome	State Zip Code GA 30165-3834		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARY Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	bursement For:  Primary General  Other (specify) ▼		SALARY
	State: District:			
В.	Full Name (Last, First, Middle Initial) Will OHara  Mailing Address 1 Wood Valley Dr S'	W		Transaction ID: 61123.E1462 Date of Disbursement  1 1 2 0 7 2 0 6 7
	City Rome	State Zip Code GA 30165-3834		Amount of Each Disbursement this Period
	Purpose of Disbursement MILEAGE REIMBURSEMENT Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis Senate President State: District:	bursement For: Primary General Other (specify)		MILEAGE REIMBURSEMENT
<u> </u>	Full Name (Last, First, Middle Initial) Petty Cash			Transaction ID: 61123.E1457 Date of Disbursement
	Mailing Address PO Box 425			10  20  200  200  200  200  200  200  2
	City Roswell	State Zip Code GA 30077-0425		Amount of Each Disbursement this Period
	Purpose of Disbursement PETTY CASH Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
	Office Sought: House Dis Senate President State: District:	bursement For: Primary General Other (specify)	Туре	11 C.F.R. 400.53 PETTY CASH
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s	UBTOTAL of Disbursements This Page (option	onal)		2418.08

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check onl	NUMBER: PAGE 45 / 64 y one)  X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and St for commercial purposes, other than using the			for the purpose of solicating contributions
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Petty Cash  Mailing Address PO Box 425			Transaction ID: 61123.E1458 Date of Disbursement
	City Roswell  Purpose of Disbursement PETTY CASH  Candidate Name	State Zip Code GA 30077-0425	Category/ Type	Amount of Each Disbursement this Period  500.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  House Senate President State:  District:	oursement For:  Primary General  Other (specify) ▼		PETTY CASH
В.	Petty Cash  Mailing Address PO Box 425			Transaction ID: 61025.E1402 Date of Disbursement  M M M / D D / Y Y Y O O O
	City Roswell Purpose of Disbursement PETTY CASH Candidate Name  Office Sought: House Senate President State: District:	State Zip Code GA 30077-0425  Dursement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period  500.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PETTY CASH
C.	Full Name (Last, First, Middle Initial) Petty Cash  Mailing Address PO Box 425			Transaction ID: 61123.E1439 Date of Disbursement  M M M / D D D / Y Y Y O O O O O O O O O O O O O O O O
	City Roswell Purpose of Disbursement PETTY CASH Candidate Name  Office Sought: House Senate President State: District:	State Zip Code GA 30077-0425  Soursement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period  250.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PETTY CASH
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S	CHEDULE B (FEC Form	13)	Use sepe	erate schedule(s)		NUMBER: PAGE 46 / 64
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						for the purpose of solicating contributions olicit contributions from such committee
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	Price for Congress					
_	Full Name (Last, First, Middle Initial)					Transaction ID: 61102.E1412
Α.	Public Opinion Strategies					Date of Disbursement
	Mailing Address 277 South W Suite 320	ashington S	treet			10 M / D 2 6 / Y 2 0 0 6 Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Alexandria		VA	22314-		7000.00
	Purpose of Disbursement POLLING					7000.00  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			POLLING
	Senate		Primary	General		1 OLLING
	State: President  District:		Other (spe	ecity) 🔻		
В.	Full Name (Last, First, Middle Initial) Nick Schulte		Transaction ID: 61123.E1461 Date of Disbursement			
	Mailing Address 2413 Cedar V	Wood Ct				111 20 7 2006
	City Marietta		State GA	Zip Code 30068-3613		Amount of Each Disbursement this Period
	Purpose of Disbursement MILEAGE REIMBURSEMENT	101.66				
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate	Disburse	ment For: Primary	General		MILEAGE REIMBURSEMENT
	State: President  District:		Other (spe	ecity) 🔻		
	Full Name (Last, First, Middle Initial)					
C.	SCM & Associates					Transaction ID: 61102.E1413 Date of Disbursement
	Mailing Address P.O. Box 720	)				10 26 2006
	City Jaffrey		State NH	Zip Code 03452-		Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL					191.29  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate	Disburse	ment For: Primary	General		DIRECT MAIL
	President State: District:		Other (spe	ecify)		
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s	UBTOTAL of Disbursements This Pa	age (optional) .			<b>&gt;</b>	7292.95

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A.	SCM & Associa	ates						Date				t		V		
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	Candidate Name					Categor Type	y/				s Rec 00.53	uired U	nder			
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B.	Smith & Howa	,						Date			-	t		V		
	Mailing Address 171 17th St NW Ste 900							1 1	/	1	Ŏ	´ L.	žoŏ	6		
	City Atlanta			State GA	Zip Code 30363-1072			Amou	int of	Each	Disb	urseme	nt this	Period	_	
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	Candidate Name									Contributions Required Under 11 C.F.R. 400.53						
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		President		Other (spe	ecify)											
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C.	Full Name (Last, William Taylor	First, Middle Initial)						Date	of Dis	burs	emen	02.E14 t	136			
	Mailing Address	PO Box 425						1 <sup>M</sup> 0	M /	D 3	3 <b>1</b>	/ Y	ž 0 ŏ	6 <sup>Y</sup>		
	City			State	Zip Code			Amou	int of	Each	Disb	urseme	nt this	Period		
	Roswell Purpose of Disbu	urcomont	(	GA	30077-0425								1097	.16	1	
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	Candidate Name			у/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53											
	Office Sought:	House	Disburser					SALA	RY							
		Senate President		Primary	General											
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11	EMIZED DISBURSEMENTS	for each category Detailed Sumn			( 17					
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress									
Α.	Full Name (Last, First, Middle Initial) The Stoneridge Group			Transaction ID: 61102.E1415  Date of Disbursement						
	Mailing Address 6115 Abbotts Bridge Roa Suite 609	d 			10 M / 26 / Y Y Y O O 6 Y					
			Code 097-		Amount of Each Disbursement this Period	1				
	Purpose of Disbursement DIRECT MAIL				56639.15  Refund or Disposal of Excess	J				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General ▼		DIRECT MAIL					
	State: District:									
В.	Full Name (Last, First, Middle Initial) USPS				Transaction ID: 61025.E1399 Date of Disbursement					
	Mailing Address 10719 Alpharetta Highwa		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$							
			Code 076-		Amount of Each Disbursement this Period	7				
	Purpose of Disbursement POSTAGE				480.00  Refund or Disposal of Excess	_				
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General ▼		POSTAGE					
	State: District:					_				
C.	Full Name (Last, First, Middle Initial) Voice Connect				Transaction ID: 61202.E1491 Date of Disbursement					
	Mailing Address 4780 Ashford Dunwoody Suite A444	Road			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix}  \begin{bmatrix} D & 1 & 6 \\ 1 & 6 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$					
			Code 338-		Amount of Each Disbursement this Period	7				
	Purpose of Disbursement TELEPHONE			•	53.51  Refund or Disposal of Excess	_				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	nent For: Primary Other (specify)	General		TELEPHONE					
_	State: District:	· · · · · · · · · · · · · · · · · · ·								
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State:

# SCHEDULE B (FEC Form 3 )

President

District:

FOR LINE NUMBER: PAGE 49/64 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Price for Congress Full Name (Last, First, Middle Initial) Transaction ID: 61025.E1400 Natl Republican Congressional Committee Date of Disbursement 24 1<sup>™</sup>0 2006 Mailing Address 320 1st Street, SE City State Zip Code Amount of Each Disbursement this Period Washington DC 20003-50000.00 Purpose of Disbursement TRANS. OF EXCESS CAMPAIGN FUNDS Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2006 House Primary X General Senate

Other (specify)

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	50000.00
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State:

# SCHEDULE B (FEC Form 3 )

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FOR LINE NUMBER: PAGE 50 / 64 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19a 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Price for Congress Full Name (Last, First, Middle Initial) Transaction ID: 61123.E1460 Tom Price, MD Date of Disbursement <sup>™</sup>1 20 2006 Mailing Address 295 Broadmeadow Cove City State Zip Code Amount of Each Disbursement this Period Roswell GA 30075-250000.00 Purpose of Disbursement Repay Loan Made/Guar. by Cand Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2006 House X General Senate Primary President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	250000.00
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	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 51 / 64 / one)  17 18 19a 19b
_		Detailed Summary Page	Ļ	20a 20b 20c X 21
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Michele Bachmann for Congress			Transaction ID: 61102.E1416 Date of Disbursement
	Mailing Address PO Box 49756			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} N & 2 \\ 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} N & 2 \\ 2 \end{smallmatrix} \end{bmatrix} \ 0 \ 0 \ 6 \ \ \ $
	City Minneapolis	State         Zip Code           MN         55449-0756		Amount of Each Disbursement this Period
	Purpose of Disbursement MICHELE BACHMANN HOUSE MN06	I		1000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify)		Michele Bachmann House MN- 06
В.	Full Name (Last, First, Middle Initial) Michele Bachmann for Congress			Transaction ID: 61023.E1389 Date of Disbursement
	Mailing Address PO Box 49756			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ 2 & Q & Q & G \end{smallmatrix}$
	City Minneapolis	State         Zip Code           MN         55449-0756		Amount of Each Disbursement this Period
	Purpose of Disbursement MICHELE BACHMANN HOUSE MN06		•	Defend as Disposal of Fuscos
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  Senate  President  State:  Disburs:	ement For: 2006 Primary X General Other (specify) ▼		Michele Bachmann House MN- 06
C.	Full Name (Last, First, Middle Initial) Bass Victory Committee			Transaction ID: 61102.E1417 Date of Disbursement
	Mailing Address PO Box 3451			10
	City Concord	State         Zip Code           NH         03302-3451		Amount of Each Disbursement this Period
	Purpose of Disbursement CHARLES BASS HOUSE NH02			Refund or Disposal of Excess
	Candidate Name	(	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify)		Charles Bass House NH02
	UBTOTAL of Disbursements This Page (optional)			4000.00

# SCHEDULE B (FEC Form 3 )

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one)  17
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NAME OF COMMITTEE (In Full) Price for Congress	o and address of any political coll		on continuents from Such Continuents
Full Name (Last, First, Middle Initial) Steve Chabot for Congress  Mailing Address 3341 Harrison Ave			Transaction ID: 61023.E1380 Date of Disbursement
City Cincinnati	State Zip Code OH 45211-5511		Amount of Each Disbursement this Period
Purpose of Disbursement STEVE CHABOT HOUSE OH01 Candidate Name  Office Sought: House Disburs	ement For: 2006	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President State: District:	Primary X General Other (specify)		Steve Chabot House OH01
Full Name (Last, First, Middle Initial)  3- Chocola for Congress			Transaction ID: 61102.E1418 Date of Disbursement
Mailing Address P.O. Box 6728			10
City South Bend	State Zip Code IN 46660-		Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement CHRIS CHOCOLA HOUSE IN02 Candidate Name J CHRISTOPHER CHOCOLA	C	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought:    X   House   Disburs     Senate   President     State: IN   District: 02	ement For: 2006 Primary X General Other (specify)		Chris Chocola House IN02
Full Name (Last, First, Middle Initial) Cubin for Congress			Transaction ID: 61102.E1419 Date of Disbursement
Mailing Address PO Box 4657			10 M / D 3 D / Y 2 O O 6 Y
City Casper	State         Zip Code           WY         82604-0657		Amount of Each Disbursement this Period
Purpose of Disbursement BARBARA CUBIN HOUSE WY Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify)	Туре	11 C.F.R. 400.53  Barbara Cubin House WY
SUBTOTAL of Disbursements This Page (optional)		▶	5000.00
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	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE (check only	
		Detailed Summary Page		17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Geoff Davis for Congress			Transaction ID: 61102.E1431 Date of Disbursement
	Mailing Address 3161 Dixie Hwy., Ste. F			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 \end{smallmatrix} \begin{smallmatrix} O & M \\ \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ M & M \\ \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ M & M \\ \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} M & M \\ M & M \\ M \\ \end{smallmatrix} $
	Erlanger	State Zip Code KY 41018-		Amount of Each Disbursement this Period
	Purpose of Disbursement GEOFFREY DAVIS HOUSE KY04 Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
	GEOFFREY C DAVIS  Office Sought: X House Senate President  State: KY District: 04	ement For: 2006 Primary X General Other (specify)	Туре	11 C.F.R. 400.53  Geoffrey Davis House KY04
В.	Full Name (Last, First, Middle Initial) Fitzpatrick for Congress			Transaction ID: 61102.E1421 Date of Disbursement
	Mailing Address 115 North Broad Street			10 M / D 3 D / Y Y Y O O 6 Y
	,	State Zip Code PA 18901-		Amount of Each Disbursement this Period
	Purpose of Disbursement MICHAEL FITZPATRICK HOUSE PA08 Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ement For: 2006 Primary X General Other (specify)		Michael Fitzpatrick House PA08
C.	Full Name (Last, First, Middle Initial) Jeff Fortenberry for Congress			Transaction ID: 61023.E1381 Date of Disbursement
	Mailing Address 1610 N Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 \end{smallmatrix} 0 \begin{smallmatrix} M \\ \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 \end{smallmatrix} 0 \begin{smallmatrix} D \\ \end{smallmatrix} ] / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 \end{smallmatrix} 0 \begin{smallmatrix} Y & G \end{smallmatrix} $
		State Zip Code NE 68508-		Amount of Each Disbursement this Period
	Purpose of Disbursement JEFF FORTENBERRY HOUSE NE01 Candidate Name		Category/	2000.00  Refund or Disposal of Excess Contributions Required Under
	Office Cought: House Dishures	ement For: 2006	Туре	11 C.F.R. 400.53
	Office Sought:  Senate  President  State:  Disburse  Disburse	ement For: 2006 Primary X General Other (specify)		Jeff Fortenberry House NE- 01
S	UBTOTAL of Disbursements This Page (optional)			5400.00
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	CHEDULE B (FEC Form 3 )	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 54 / 64 y one)
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) John Gard for Congress			Transaction ID: 61023.E1386  Date of Disbursement
	Mailing Address 2701 Executive Dr			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & 2 & 0 & Q & G \end{bmatrix} $
	City Green Bay	State         Zip Code           WI         54304-5497		Amount of Each Disbursement this Period
	Purpose of Disbursement JOHN GARD HOUSE WI08		• •	2000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)		John Gard House WI08
В.	Full Name (Last, First, Middle Initial) Jim Gerlach for Congress Committee			Transaction ID: 61023.E1382 Date of Disbursement
	Mailing Address 911 Welsh Ayres Way			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} $
	•	State Zip Code PA 19335-		Amount of Each Disbursement this Period
	Purpose of Disbursement JIM GERLACH HOUSE PA06		•	2000.00  Refund or Disposal of Excess
	Candidate Name JIM GERLACH		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  X House  Senate  President  State: PA  Disburse	ement For: 2006 Primary X General Other (specify)		Jim Gerlach House PA06
С.	Full Name (Last, First, Middle Initial) Randy Graf for Congress			Transaction ID: 61025.E1401 Date of Disbursement
	Mailing Address 1800 E Fort Lowell Rd #	126-203		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & G \\ Y & 2 & 0 & Q & G \end{bmatrix}$
		State Zip Code AZ 85719-7300		Amount of Each Disbursement this Period
	Purpose of Disbursement RANDY GRAF HOUSE AZ08		v v	2000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ement For: 2006 Primary X General Other (specify)		
s	UBTOTAL of Disbursements This Page (optional)			6000.00
	OTAL This Period (last page this line number only)			

	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	NUMBER: PAGE 55 / 64 y one) 17 18 19a 19b
Λ	. Information, and of the second Department and Chaterer	, ,	<u> </u>	20a 20b 20c X 21
	y Information copied from such Reports and Statem or commercial purposes, other than using the name			
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Hayworth for Congress			Transaction ID: 61102.E1424 Date of Disbursement
	Mailing Address 14300 N Northsight Blvd	Ste 105		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & O \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} $
		State Zip Code AZ 85260-3673		Amount of Each Disbursement this Period
	Purpose of Disbursement J.D. HAYWORTH HOUSE AZ05			2000.00
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: 2006 Primary X General Other (specify) ▼		J.D. Hayworth House AZ05
_	Full Name (Last, First, Middle Initial)			Transaction ID: 61102.E1428
В.	Nancy Johnson for Congress			Date of Disbursement
	Mailing Address PO Box 1986			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&0&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&3&0\\3&0\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&0&0\\2&0&0&6\end{smallmatrix}\end{bmatrix}$
	,	State         Zip Code           CT         06050-1986		Amount of Each Disbursement this Period
	Purpose of Disbursement NANCY JOHNSON HOUSE CT05		•	1000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: 2006 Primary X General Other (specify) ▼		Nancy Johnson House CT05
С.	State: District:  Full Name (Last, First, Middle Initial)  Kuhl for Congress			Transaction ID: 61023.E1388 Date of Disbursement
	Mailing Address P.O. Box 329			$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}0&M\end{smallmatrix} \ / \ \begin{bmatrix}D\\2\end{smallmatrix}0&D\end{smallmatrix} \ / \ \begin{bmatrix}Y&Y&Y&Y&Y&Y\\2\end{smallmatrix}0&Y&Y&Y&Y&Y&Y&Y&Y$
		State Zip Code NY 14810-		Amount of Each Disbursement this Period
	Purpose of Disbursement J. RANDY KUHL HOUSE NY29			2000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: 2006 Primary X General Other (specify)		J. Randy Kuhl House NY29
, gi	JBTOTAL of Disbursements This Page (optional) .			5000.00
	OTAL This Period (last page this line number only)			

	CHEDULE B (FEC Form 3)	Use seperate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 56 / 64 yone)
	EMIZED DISBURSEMENTS	Detailed Summary Page		17 18 19a 19b 20a 20b 20c X 21
	Information copied from such Reports and Statem or commercial purposes, other than using the name			
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Cathy McMorris for Congress			Transaction ID: 61102.E1425 Date of Disbursement
	Mailing Address P.O. Box 137			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & O \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ O & O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ O & O & G \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ O & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y$
	City Spokane	State Zip Code WA 99210-		Amount of Each Disbursement this Period
	Purpose of Disbursement CATHY MCMORRIS HOUSE WA05			2000.00
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)		Cathy McMorris House WA05
В.	Full Name (Last, First, Middle Initial) David McSweeney for Congress			Transaction ID: 61102.E1420 Date of Disbursement
	Mailing Address 890 S Rand Rd Ste C			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 3 & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Lake Zurich	State         Zip Code           IL         60047-3418		Amount of Each Disbursement this Period
	Purpose of Disbursement DAVID MCSWEENEY HOUSE IL08			1000.00
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)		David McSweeney House IL08
C.	Full Name (Last, First, Middle Initial) Ray Meier for Congress			Transaction ID: 61102.E1429 Date of Disbursement
	Mailing Address PO Box 120			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} J & J & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & G \\ 2 & Q & Q & G \end{bmatrix} $
		State Zip Code NY 13503-0120		Amount of Each Disbursement this Period
	Purpose of Disbursement RAY MEIER HOUSE NY24			1000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)		Ray Meier House NY24
	2.5			4000.00

	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 57 / 64 (check only one)
		Detailed Summary Page	17
			any person for the purpose of solicating contributions mittee to solicit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress		
Α.	Full Name (Last, First, Middle Initial) Ray Meier for Congress  Mailing Address PO Box 120		Transaction ID: 61023.E1392 Date of Disbursement  MOM  Description  Transaction ID: 61023.E1392 Date of Disbursement  Description  Transaction ID: 61023.E1392 Date of Disbursement
	City Utica	State         Zip Code           NY         13503-0120	Amount of Each Disbursement this Period
	Purpose of Disbursement RAY MEIER HOUSE NY24 Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	rsement For: 2006 Primary X General Other (specify)	Ray Meier House NY24
В.	Full Name (Last, First, Middle Initial) Musgrave for Congress		Transaction ID: 61102.E1427 Date of Disbursent
	Mailing Address 5401 Stone Creek Cir	1 0 M / D 3 D / Y Y Y O O 6 Y	
	City Loveland  Purpose of Disbursement MARILYN MUSGRAVE HOUSE CO04	State Zip Code CO 80538-	Amount of Each Disbursement this Period  1000.00
	Candidate Name MARILYN N MUSGRAVE	<b>_</b>	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  X House Senate President State: CO District: 04	rsement For: 2006 Primary X General Other (specify)	Marilyn Musgrave House CO- 04
C.	Full Name (Last, First, Middle Initial) Joe Negron for Congress		Transaction ID: 61023.E1385 Date of Disbursement
	Mailing Address PO Box 1816		10 M / D 2 D / Y 2 0 0 6 Y
	City Stuart	State Zip Code FL 34995-1816	Amount of Each Disbursement this Period
	Purpose of Disbursement JOE NEGRON HOUSE FL 16 Candidate Name	Ca	2000.00  Refund or Disposal of Excess Contributions Required Under
	Office Sought:  Senate President State:  Disbut	rsement For: 2006 Primary X General Other (specify)	Type 11 C.F.R. 400.53  Joe Negron House FL 16
•	JBTOTAL of Disbursements This Page (option	al)	4000.00

3	CHEDULE B (FECForm 3)	Use seperate schedule(s	1 -	E NUMBER: PAGE 58 / 64
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	17 18 19a 19b 20a 20b 20c X 21
	Information copied from such Reports and State or commercial purposes, other than using the nar			
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
Α.	Full Name (Last, First, Middle Initial) Joy Padgett for Congress			Transaction ID: 61023.E1387 Date of Disbursement
	Mailing Address 871 Walnut St			10
	City Coshocton	State         Zip Code           OH         43812-1649	)	Amount of Each Disbursement this Period
	Purpose of Disbursement JOY PADGETT HOUSE OH18 Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	sement For: 2006 Primary X General Other (specify)	1 "	Joy Padgett House OH18
В.	Full Name (Last, First, Middle Initial) Friends of Dave Reichert			Transaction ID: 61102.E1423 Date of Disbursement
	Mailing Address P.O. Box 53322			10 7 30 7 2006
	City Bellevue	State Zip Code WA 98015-		Amount of Each Disbursement this Period
	Purpose of Disbursement DAVE REICHERT HOUSE WA08 Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	sement For: 2006 Primary X General Other (specify)	Турс	Dave Reichert House WA08
C.	Full Name (Last, First, Middle Initial) Peter Roskam for Congress			Transaction ID: 61023.E1391 Date of Disbursement
	Mailing Address 141 Shelley Lane			10
	City Wheaton	State Zip Code IL 60187-		Amount of Each Disbursement this Period
	Purpose of Disbursement PETER ROSKAM HOUSE IL06			1000.00  Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President State: District:	sement For: 2006 Primary X General Other (specify)		Peter Roskam House IL06
	<u> </u>	)		5000.00

SCHEDULE B (FECFORIII 3 )		NE NUMBER: PAGE 59 / 64
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	only one)  17
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Price for Congress		
Full Name (Last, First, Middle Initial) Clay Shaw for Congress  Mailing Address PO Box 2188		Transaction ID: 61102.E1422 Date of Disbursement  10
	State Zip Code FL 33303-2188	Amount of Each Disbursement this Period
Purpose of Disbursement CLAY SHAW HOUSE FL22 Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburser Senate President State: District:	ment For: 2006 Primary X General Other (specify) ▼	Clay Shaw House FL22
Full Name (Last, First, Middle Initial)  Robert Simmons for Congress		Transaction ID: 61023.E1393 Date of Disbursement
Mailing Address P.O. Box 268, Drawer 27		10 M / D D / Y 2006 Y
	State Zip Code CT 06378-	Amount of Each Disbursement this Period  1000.00
ROBERT SIMMONS HOUSE CT02  Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburser Senate President State: District:	nent For: 2006 Primary X General Other (specify) ▼	Robert Simmons House CT02
Full Name (Last, First, Middle Initial) Robert Simmons for Congress		Transaction ID: 61102.E1430 Date of Disbursement
Mailing Address P.O. Box 268, Drawer 27	1	10
Stonington	State Zip Code CT 06378-	Amount of Each Disbursement this Period
Purpose of Disbursement ROBERT SIMMONS HOUSE CT02 Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	nent For: 2006 Primary X General Other (specify) ▼	Robert Simmons House CT02
SUBTOTAL of Disbursements This Page (optional)		4000.00
TOTAL This Period (last page this line number only)		

	CHEDULE B (FECFORIII 3 )	Use seperate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and Stat for commercial purposes, other than using the na			
$\rangle$	NAME OF COMMITTEE (In Full) Price for Congress			
۹.	Full Name (Last, First, Middle Initial) Mike Sodrel for Congress  Mailing Address 702 North Shore Drive	, Ste. 500		Transaction ID: 61102.E1426 Date of Disbursement
	City Jeffersonville	State Zip Code IN 47130-		Amount of Each Disbursement this Period
	Purpose of Disbursement MIKE SODREL HOUSE IN09 Candidate Name MICHAEL E SODREL		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  X House Senate President State: IN District: 09	rsement For: 2006 Primary X General Other (specify)		Mike Sodrel House IN09
В.	Full Name (Last, First, Middle Initial) Mark Souder for Congress			Transaction ID: 61023.E1394 Date of Disbursement
	Mailing Address PO Box 40233			1 0 M / 2 0 / Y 2 0 0 6 Y
	City Fort Wayne Purpose of Disbursement MARK SOUDER HOUSE IN03 Candidate Name	State Zip Code IN 46804-0233	Category/	Amount of Each Disbursement this Period  2000.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu Senate President State: District:	rsement For: 2006 Primary X General Other (specify)	Туре	Mark Souder House IN03
Э.	Full Name (Last, First, Middle Initial) Tiberi for Congress			Transaction ID: 61023.E1395 Date of Disbursement
	Mailing Address 2021 E Dublin Granvill	e Rd Ste 200		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & 0 \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & 0 & 0 \\ 2 & 0 & 0 & 6 \end{smallmatrix} $
	City Columbus	State         Zip Code           OH         43229-3572		Amount of Each Disbursement this Period
	Purpose of Disbursement PATRICK TIBERI HOUSE OH12 Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	rsement For: 2006 Primary X General Other (specify)	7,750	Patrick Tiberi House OH12
•	UBTOTAL of Disbursements This Page (optiona			5700.00

ITEMIZED DISBURSEMENTS	Lica congrata congdula(c)	FOR LINE NUMBER: PAGE 61 / 64 check only one)
	Detailed Summary Page	17 18 19a 19b 20a 20b 20c X 21
Any Information copied from such Reports and Stator for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) Price for Congress		
Full Name (Last, First, Middle Initial)  A. Tim Walberg for Congress  Mailing Address 6769 Teachout Rd		Transaction ID: 61202.E1494 Date of Disbursement
City Tipton	State Zip Code MI 49287-9807	Amount of Each Disbursement this Period
Purpose of Disbursement TIM WALBERG HOUSE MI07 Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbute Senate President State: District:	rsement For: 2006 Primary X General Other (specify)	Tim Walberg House MI07
Full Name (Last, First, Middle Initial) <b>B.</b> Jim Walsh for Congress		Transaction ID: 61023.E1397 Date of Disbursement
Mailing Address PO Box 1974		1 0 M / D 2 0 / Y 2 0 0 6 Y
City Syracuse Purpose of Disbursement	State         Zip Code           NY         13201-1974	Amount of Each Disbursement this Period 2000.00
JIM WALSH HOUSE NY25 Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought:  Senate  President  State:  Disbut	rsement For: 2006 Primary X General Other (specify)	Jim Walsh House NY25
Full Name (Last, First, Middle Initial)  C. Heather Wilson for Congress		Transaction ID: 61023.E1383 Date of Disbursement
Mailing Address P.O. Box 14070		10
City Albuquerque	State Zip Code NM 87191-	Amount of Each Disbursement this Period
Purpose of Disbursement HEATHER WILSON HOUSE NM01 Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought:    House   Disbu     Senate   President     State: District:	rsement For: 2006 Primary X General Other (specify)	Heather Wilson House NM01
SUBTOTAL of Disbursements This Page (options	al)	4000.00
TOTAL This Period (last page this line number or	ıly)	52100.00

## SCHEDULE C (FEC Form 3 ) **LOANS**

Use separate schedule(s) for each category of the

PAGE 62/64 FOR LINE NUMBER:

		l
1	13a	l
1	13b	l

	Detailed Summary Page	e (Check only one)   X   13a   13b
NAME OF COMMITTEE (In Full)		1100
Price for Congress		
	Tran	saction ID: LS072220042C3061
LOAN SOURCE Full Name (Last, First, Middle Initial)		Election:
Thomas E. Price, MD - Personal Funds		Primary
Mailing Address 295 Broadmeadow Cove		General  X Other (specify) ▼
Mailing Address 295 Broadmeadow Cove		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
City Roswell State GA ZIP Code	30075-	<u>Primary</u>
Original Amount of Loan Cumulative Payment To D	Pate Balar	nce Outstanding at Close of This Period
		52931.31
250000.00	197068.69	52931.31
TERMS		
Date Incurred Date Due	Interest	Rate Secured:
0 9 D D 2 0 0 3 2 20061231		.0000 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source		
	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed	
	Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	•	
	Amount	
Oily State En Sous	Guaranteed Outstanding:	
	Name of Employer	
Tall Valle (East, 1 list, Middle Illital)	rvano oi Employei	
Mailing Address	Occupation	
01, 710,0	Amount Guaranteed	
Oity State Zii Gode		
	Name of Employer	
Mailing Address	Occupation	
	A	
City State ZIP Code	Amount Guaranteed	
	Outstanding:	
CURTOTAL O THE DESCRIPTION DATE ( 15 1 1)		52931.31
SUBTOTALS This Period This Page (optional)	<u></u>	32301.01
TOTALS This Period (last page in this line only)	<b>&gt;</b>	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sched	ule D, carry forward to app	propraite line of Summary.

## SCHEDULE C (FEC Form $\mathbf{3}$ ) LOANS

Use separate schedule(s) for each category of the

PAGE 63 / 64 FOF

R LINE NUMBER: eck only one)	Х	13a
		13b

	Detailed Summary Pag		
NAME OF COMMITTEE (In Full)			
Price for Congress			
	Tra	nsaction ID: LS41014.C3881	
LOAN SOURCE Full Name (Last, First, Middle Initial)		Election: Primary	
Thomas E. Price, MD - Personal Funds		General	
Mailing Address 295 Broadmeadow Cove		X Other (specify) ▼	
Mailing Address 295 Broadmeadow Cove		Primary Run-Off	
City Roswell State GA ZIP Cod	e 30075-	Filliary Ruil-Oli	
Original Amount of Loan Cumulative Payment To	Date Bala	ance Outstanding at Close of This Peric	
		-	
249000.00	45800.00	203200.00	
TERMS			
Date Incurred Date Due	Interes	t Rate Secured:	
0 7 2 8 2 0 0 4 20061231		.0000 % (apr) Yes X I	
		% (aρι)	
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	O		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
·	Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
McTar Address			
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
·	Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address			
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
	Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	O		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
	Outstanding:		
SUBTOTALS This Period This Page (optional)			
ODFOTALO TINOT ONOU TINOT ago (optional)			
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sche	dule D, carry forward to ap	propraite line of Summary.	

### S L

SCHEDULE C (FEC Form 3 )			PAGE 64 / 64
LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)  X 13a 13b
NAME OF COMMITTEE (In Full)			100
Price for Congress		Transa	action ID: LS60419.C7136
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		Election:
Thomas E. Price, MD - Personal Fund	ls		X Primary General
Mailing Address 295 Broadmeadow Cove			Other (specify)
City Roswell	State GA ZIP Cod	le 30075-	
Original Amount of Loan	Cumulative Payment To	Date Balance	e Outstanding at Close of This Period
250000.00		250000.00	0.00
TERMS  Date Incurred	Date Due	Interest Ra	ate Secured:
09 02 2005	20061231		0000 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Lo	an Source		
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	1 1 1 1 1 1
City State	ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
CURTOTAL C This Povind This Page (aption-1)			0.00
SUBTOTALS This Period This Page (optional)		······································	
TOTALS This Period (last page in this line only	)		256131.31

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.